Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Tony Gonzales for Congress 14439 NW Military Hwy ADDRESS (number and street) Ste 108-488 (Check if address is changed) San Antonio 78231 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS TonyGonzalesforCongress@gmail.com (Check if address is changed) Optional Second E-Mail Address compliance@rightsidecompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) TonyGonzalesforCongress.com (Check if address is changed) DATE 2022 C00706614 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. HOBBS, CABELL, , , Type or Print Name of Treasurer HOBBS, CABELL, , , [Electronically Filed] Date 05 2022 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

E	EC Form 1 (Revised 03/2022)	Page 2
	TYPE OF COMMITTEE:	
	Candidate Committee:	
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the information below.)	candidate
	Name of Candidate Gonzales, Ernest, Anthony, , II	
	Candidate Party Affiliation REP Sought: House Senate President	State TX District 23
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	23
	Name of Candidate	
	Party Committee:	
	(d) This committee is a (National, State or subordinate) committee of the Republican, or	etc.) Party
	Political Action Committee (PAC):	
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	organization is a:
	Corporation Corporation w/o Capital Stock Labor Org	ganization
	Membership Organization Trade Association Cooperati	ve
	In addition, this committee is a Lobbyist/Registrant PAC.	
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	(g) This committee is an independent expenditure-only political committee (Super PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC	>).
	In addition, this committee is a Lobbyist/Registrant PAC.	
	Joint Fundraising Representative:	
	(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political
	(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political
	Committees Participating in Joint Fundraiser	
	1C	
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WAR VETERANS FUND Mailing Address	1	FEC Form 1 (Revised 02	2/2009)			Page 3
8. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor WAR VETERANS FUND Mailing Address PO BOX 26141	V		_			
WAR VETERANS FUND Mailing Address PO BOX 26141						
Mailing Address PO BOX 26141	6.			Fundraising Representa	itive, or Leader	ship PAC Sponsor
ALEXANDRIA CITY ▲ STATE ▲ ZIP CODE ▲ Relationship: Connected Organization Affiliated Organization ▼ Joint Fundraising Representative Leadership PAC Sponse 7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. HOBBS, CABELL, , , Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼ Telephone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name HOBBS, CABELL, , , of Treasurer Mailing Address 11613 Huebner All Name HOBBS, CABELL, , of Treasurer All Page Hobbs CABELL, , of Treasurer Title or Position ▼ Telephone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name HOBBS, CABELL, , of Treasurer Mailing Address 11613 Huebner All Page Hobbs CABELL, , of Treasurer Mailing Address 11613 Huebner All Page Hobbs CABELL, , of Treasurer All Page Hobbs CABELL, , of Treasurer Mailing Address 11613 Huebner		VARVETERANSTO				
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CITY ▲ STATE ▲ ZIP CODE ▲ Relationship: Connected Organization Affiliated Organization x Joint Fundraising Representative Leadership PAC Sponsor 7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. HOBBS, CABELL, Full Name		Mailing Address				
CITY ▲ STATE ▲ ZIP CODE ▲ Relationship: Connected Organization Affiliated Organization x Joint Fundraising Representative Leadership PAC Sponsor 7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. HOBBS, CABELL, Full Name						
Relationship: Connected Organization Affiliated Organization X Joint Fundraising Representative Leadership PAC Sponsor 7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. HOBBS, CABELL, Full Name Mailing Address CITY A STATE A ZIP CODE A Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name of Treasurer Mailing Address 11613 Huebner Mailing Address CITY A STATE A ZIP CODE A Title or Position V			ALEXANDRIA	VA		
7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. HOBBS, CABELL, Full Name Mailing Address 11813 Huebner CITY A STATE A ZIP CODE A Title or Position ▼ Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name of Treasurer Mailing Address 11813 Huebner Mailing Address CITY A STATE A ZIP CODE A Title or Position ▼ Title or Position ▼			CITY ▲	STATE	Ē ▲	ZIP CODE ▲
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HOBBS, CABELL, , , Full Name Mailing Address 11613 Huebner		Custodian of Records: Identi	fy by name, address (phone number optic	onal) and position of the p	erson in posses	sion of committee
Full Name Mailing Address 11613 Huebner		books and records.				
Mailing Address San Antonio		The second secon	ABELL, , ,			
San Antonio CITY ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼ Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name of Treasurer Mailing Address 11613 Huebner		Full Name				
CITY ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼ Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name HOBBS, CABELL, , of Treasurer Mailing Address 11613 Huebner Hobber		Mailing Address	11613 Huebner			
CITY ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼ Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name HOBBS, CABELL, , of Treasurer Mailing Address 11613 Huebner Hobber						
Title or Position ▼ Treasurer Telephone number Tolephone number Telephone number Tolephone number Telephone number Tolephone numbe			San Antonio	TX	78248	
Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name HOBBS, CABELL, , , of Treasurer Mailing Address 11613 Huebner			CITY A	STATE	E_▲	ZIP CODE ▲
8. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name HOBBS, CABELL, , , of Treasurer Mailing Address 11613 Huebner		Title or Position ▼				
8. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name HOBBS, CABELL, , , of Treasurer Mailing Address 11613 Huebner		Treasurer		Telephone number	-	
any designated agent (e.g., assistant treasurer). Full Name of Treasurer Mailing Address 11613 Huebner				тогорионо нашес		
Full Name of Treasurer Mailing Address 11613 Huebner	8.			ne treasurer of the comm	nittee; and the n	ame and address of
of Treasurer Mailing Address 11613 Huebner		any designated agent (e.g., a	ssistant treasurer).			
Mailing Address 11613 Huebner			ABELL, , ,			
Mailing Address San Antonio		of freasurer	44040 Uharka ara			
CITY ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼		Mailing Address	11613 Huebner			
CITY ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼						
Title or Position ▼			San Antonio		78248	
Title or Position ▼			CITY ▲	STATE	E 🛦	ZIP CODE ▲
Treasurer		Title or Position ▼				
		Treasurer		Telephone number		

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Full Name of Designated Agent	of	
Mailing Add	ress	
Title or Pos	CITY ▲ STATE ▲	ZIP CODE ▲
	Telephone number	-
Banks or C safety depo	other Depositories: List all banks or other depositories in which the committee deposits funds, sit boxes or maintains funds.	holds accounts, rents
Name of Ba	ank, Depository, etc.	
	Frost Bank	
Mailing Add	P.O. Box 1600	
	San Antonio TX 78	3296
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Ba	ink, Depository, etc.	
	Eagle Bank	
Mailing Add	ress 201 K St NW	
	Washington DC 20	006
	CITY ▲ STATE ▲	ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

al Information 6, 8 and/or 9 Page $\frac{5}{}$ of $\frac{9}{}$

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
7-			
ame of Any Connected	Organization, Affiliated Committee, Joint Fun	ndraising Representative	e, or Leadership PAC Spor
Take Back the H	ouse Texas 2022		
	DO Day 20044		
Mailing Address	PO Box 30844		
	Bethesda	MD MD	20824
Relationship:	CITY A	STATE A	ZIP CODE ▲
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	Affiliated Committee	oint Fundraising Represent	ative Leadership PAC S
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:		
,,,,	1	 	FEC ID number	
	2		FEC ID number	
	3.		FEC ID number	
	4.		FEC ID number	
6.		Organization, Affiliated Committee, Joint Fund	raising Representative,	or Leadership PAC Sponsor
	TONY GONZALE	S VICTORY FUND		
	Mailing Address	12000 STARCREST DR		
		STE 101		
		SAN ANTONIO		78247
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Representation	ve Leadership PAC Sponsor
8.	Designated Agent: Identify	y by name, address (phone number - optional)		
	Full Name			
	Full Name			
	Mailing Address	CITY A	STATE A	ZIP CODE A
		•		
	Mailing Address TITLE OR POSITION	т	STATE ▲ elephone Number	ZIP CODE A
9.	Mailing Address TITLE OR POSITION	ries: List all banks or other depositories in which	STATE ▲ elephone Number	ZIP CODE A
9.	Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail	ries: List all banks or other depositories in which	STATE ▲ elephone Number	ZIP CODE A
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FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi			
1.		FEC ID number	C
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4		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spon
TAKE BACK THE	E HOUSE 2022		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824-0844
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	ative Leadership PAC S
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
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FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1.		FEC ID number	C
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4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e. or Leadership PAC Spons
	ATRIOT DAY JFC		,
1			
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	VA I	22314
	CITY A	STATE ▲ Fundraising Representa	ZIP CODE ▲ ative Leadership PAC Sp
Connected	CITY ▲ d Organization Affiliated Committee		
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FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	3		
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4.		FEC ID number	C
•	I Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
HISPANIC LEAD	ERSHIP TRUST PARTNERSHIP		
	<u> </u>		
Mailing Address	PO BOX 341027		
	AUSTIN	TX	78734
Relationship:	CITY A	STATE A	ZIP CODE ▲
		Fundraising Represent	ative Leadership PAC S
	Affiliated Committee	Fundraising Represent	ative Leadership PAC Sp
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